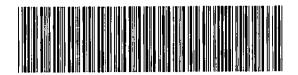
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(Requestor's Name)				
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PICK-UP WAIT MAIL				
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(Document Number)				
Certified Copies Certificates of Status				
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Harman Transport USA	Inc.		
Na Na	me of corporation - mu	st include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign "Certificate of Existence," or "Certificate of Existence	cate of Good Standing'	' and check are submi	Business in Florida," itted to register the
Please return all correspondence cond	erning this matter to th	e following:	
Harman Shoker		_	
	Name of Perso	on	
Harman Transport USA Inc			
	Firm/Company	,	· · ·
2275 E 11th Ave			
	Address		
Hialeah, FL 33013			
	City/State and Z	ip code	
info@harmangroup.us			
E-mail add	dress: (to be used for fu	ture annual report no	tification)
For further information concerning th	nis matter, please call:		
Harman Shoker	at (647)	02-6948	
Name of Person	Area Code	Daytime Telepho	one Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	A DEPARTMENT OF Filing Fee & \$7	STATE 8.75 Filing Fee & ertified Copy	\$87.50 Filing Fee. Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

HARMAN TRA	INSPORT USA INC.		
	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)	
TEXAS	3	36-5032578	
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)	
Oct 24 2022	5.		
(Date	of incorporation)	(Date of duration, if other than perpetual)	
Feb 6th 2023			
·		in Florida, if prior to registration) 502, F.S., to determine penalty liability)	
7. 2275 E 11th Ave.	Hialeah, FL 33013		
	(Principal of	fice street address)	
	(Current maili	ng address, if different)	
8. Name and stree	et address of Florida registered agent: (P.		
Name:	Harmanmit Shoker	O. Box NOT acceptable)	
Office Address:	2275 E 11th Ave	22	
	Hialeah	, Florida 33013 (Zip code)	
	(City)	(Zip code)	
Having been nam designated in this further agree to c	application. I hereby accept the appoint	vice of process for the above stated corporation at the place to ment as registered agent and agree to act in this capacity. I relative to the proper and complete performance of my dutie osition as registered agent.	
	Harman Shi	rker	
	(Registered agent's	signature)	
10. Attached is a	certificate of existence duly authenticated	, not more than 90 days prior to delivery of this application to	

The production of the party of the primary of the p

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS Name: Harmanmit Shoker Name: _____ □Chairman □Chairman OVice Chairman Address: Harmannit Shoker □ Vice Chairman Address: 2275 E 11th Ave, Hialeah, FL, 33013 Director Director Harmanmit Shoker President □President □Vice President □Vice President ☐ Secretary □Treasurer □ Secretary □ Treasurer □Other _____ Other ____ □Other _____ □Other _____ Name: Name: _____ □Chairman Chairman □Vice Chairman Address: _____ Address: □Vice Chairman □ Director □ Director □President President □Vice President □Vice President __ □ Secretary ☐ Treasurer ☐Secretary □Treasurer Other _____ Other _____ □Other _____ Other _____ Name: Name: □ Chairman □Chairman Address: □Vice Chairman Address: _____ □Vice Chairman Director □ Director □ President □ President □Vice President __ □Vice President □Treasurer □Treasurer ☐ Secretary □ Secretary □Other _____ □Other _____ □Other _____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. Harman Shoker Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Harman Shoker

(Typed or printed name and capacity of person signing application)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for HARMAN TRANSPORT USA INC. (file number 804781190), a Domestic For-Profit Corporation, was filed in this office on October 24, 2022.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 01, 2023.



gave Helson

Jane Nelson Secretary of State

| Come visit us on the internet at https://www.sos.texas.gov/
| Phone: (512) 463-5555 | Fax: (512) 463-5709 | Dial: 7-1-1 for Relay Services
| Prepared by: SOS-WEB | TID: 10264 | Document: 1218739330003